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Bib Data Sheet

CONFIRMATION NO. 7765

<b>SERIAL NUMBER</b> 10/773,606	<b>FILING OR 371(c) DATE</b> 02/06/2004 <b>RULE</b>	<b>CLASS</b> 455	<b>GROUP ART UNIT</b> 2618	<b>ATTORNEY DOCKET NO.</b> 17226-3
<b>APPLICANTS</b> Ki Il Kim, Los Angeles, CA;				
<b>** CONTINUING DATA *****</b> This application is a CIP of 10/719,363 11/20/2003 which is a CON of 09/531,356 03/20/2000 PAT 6,681,120 which is a CIP of 08/846,108 04/25/1997 PAT 6,278,884 <i>yes</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>no</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 05/06/2004</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <input checked="" type="checkbox"/> Allowance Acknowledged Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> CA	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 41
<b>INDEPENDENT CLAIMS</b> 5				
<b>ADDRESS</b> 23676				
<b>TITLE</b> Mobile communication and stethoscope system				
<b>FILING FEE RECEIVED</b> 1060	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	